

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	MA		06-19
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		WSEW	6/29/01
FORMALITY REVIEW	HL	712	08-04-01
RESPONSE FORMALITY REVIEW	MS	1127	10/25/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	12/18/02	
2	✓	11/12/02	
3	✓		
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Best Available Copy

If more than 150 claims or 10 actions  
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FCCSB  
 08-10-01  
 030  
 10-25-01